Fill in this info	ormation to identify your	case:		
Debtor 1	Cheryl A. Bach			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States B	Bankruptcy Court for the:	WESTERN DISTRICT	OF PENNSYLVANIA	
Case number	18-20766			
(if known)				Check if this is an amended filing

### Official Form 106Sum

### Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

Value of what you own
Aule A/B
Your liabilities Amount you owe  Irred by Property (Official Form 106D) Fount of claim, at the bottom of the last page of Part 1 of Schedule D  If Claims (Official Form 106E/F) Funsecured claims) from line 6e of Schedule E/F
Your liabilities Amount you owe  ared by Property (Official Form 106D) Fount of claim, at the bottom of the last page of Part 1 of Schedule D  If Claims (Official Form 106E/F) Funsecured claims) from line 6e of Schedule E/F
Your liabilities Amount you owe  Fired by Property (Official Form 106D) Fount of claim, at the bottom of the last page of Part 1 of Schedule D  Fig. Claims (Official Form 106E/F) Funsecured claims) from line 6e of Schedule E/F
Amount you owe  ared by Property (Official Form 106D) bunt of claim, at the bottom of the last page of Part 1 of Schedule D  Claims (Official Form 106E/F) unsecured claims) from line 6e of Schedule E/F
tount of claim, at the bottom of the last page of Part 1 of Schedule D  If Claims (Official Form 106E/F)  unsecured claims) from line 6e of Schedule E/F
unsecured claims) from line 6e of Schedule E/F\$  49,314.00  Your total liabilities  \$ 199,314.00
Your total liabilities \$ 199,314.00
5
12 of <i>Schedule I</i> \$\$
J) Schedule J\$ <b>2,700.00</b>
rative and Statistical Records
rs 7, 11, or 13?
rt of the form. Check this box and submit this form to the court with your other schedules.

Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Page 2 of 42 Case number (if known) 18-20766 Debtor 1 Cheryl A. Bach

From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

7,393.00 \$

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total clai	m
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. <b>Total.</b> Add lines 9a through 9f.	\$	0.00

		e 18-20766-J/		Doo	cument		ntered 03/2 3 of 42	9/18 08	:27:29	De	sc Main
	in this info	rmation to identify  Cheryl A. Ba		is filing	j:						
Deb	tor 2	First Name	Middle	Name		Last Name					
		Bankruptcy Court for			ICT OF PE	ENNSYLVANIA					
Cas	e number	18-20766									Check if this is an amended filing
Sc	hedu	orm 106A/B <b>le A/B: Pr</b>	operty		anh ann	Now count fits	i	antomony lie	44ha aaa4 in	46.0	12/15
hink nforr	it fits best. mation. If mo er every que	separately list and de Be as complete and a ore space is needed, a estion.  e Each Residence, Bu	accurate as possibl attach a separate sł	e. If two neet to ti	married penis form. O	eople are filing to n the top of any	ogether, both are additional pages	equally resp	onsible for su	pplyi	ing correct
	5836 Shi	is the property?  Irley Drive s, if available, or other desi	cription	What ■	Single-far	perty? Check all th mily home multi-unit building		the amount	of any secure	d clai	or exemptions. Put ms on Schedule D: scured by Property.
	Bethel P	ark PA	<b>15102-0000</b> ZIP Code		Manufactor Land Investmen Timeshare	nium or cooperation red or mobile ho nt property e			perty? 50,000.00	ро	rrent value of the rtion you own? \$150,000.00
	Allegher	w			Other has an inte Debtor 1 o	•	erty? Check one	(such as fe	ee simple, ten e), if known.		by the entireties, or
	County	.,		□ □ Other	Debtor 1 a At least or	and Debtor 2 only ne of the debtors		(see ins	x if this is com structions) cal	nmun	ity property
l	pages you	ollar value of the po have attached for l							=>		\$150,000.00

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles

■ No

☐ Yes

Filed 03/29/18 Case 18-20766-JAD Doc 14 Entered 03/29/18 08:27:29 Desc Main Page 4 of 42 Document Case number (if known) 18-20766 Debtor 1 Cheryl A. Bach 4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories No ☐ Yes 5 Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for \$0.00 pages you have attached for Part 2. Write that number here..... Part 3: Describe Your Personal and Household Items Do you own or have any legal or equitable interest in any of the following items? Current value of the portion you own? Do not deduct secured claims or exemptions. 6. Household goods and furnishings Examples: Major appliances, furniture, linens, china, kitchenware □ No ■ Yes. Describe..... Misc. household furnishings \$3,500.00 Small household appliances \$150.00 4 TV's, 2 DVD players, laptop computer, X-Box, clock radio, digital \$1,800.00 camera \$300.00 Lawn mower and misc. gardening tools \$150.00 Framed pictures \$100.00 Knick knacks 7. Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games ■ No ☐ Yes. Describe..... 8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles No ☐ Yes. Describe..... 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments ☐ No Yes. Describe..... Golf clubs \$250.00

10. Firearms

Examples: Pistols, rifles, shotguns, ammunition, and related equipment

■ No

Ca	ise 18-20766-J	IAD Doc 14		Entered 03/29/18 08:27:	29 Desc Main
Debtor 1	Cheryl A. Bach		Document Pa	age 5 of 42 Case number (if known)	18-20766
☐ Yes. [	Describe				
☐ No	es: Everyday clothes,	furs, leather coats, d	esigner wear, shoes, acce	essories	
	Clot	hing			\$800.00
		9			
□ No	es: Everyday jewelry, o	costume jewelry, eng	gagement rings, wedding r	rings, heirloom jewelry, watches, gems,	gold, silver
	Jew	elry			\$2,000.00
No Yes. C  14. Any other No Yes. C  15. Add th	es: Dogs, cats, birds, he can be caused by the case of	sehold items you di		ling any health aids you did not list  atries for pages you have attached	\$9,050.00
	cribe Your Financial Ass				
Do you owr	n or have any legal o	r equitable interest	in any of the following?		Current value of the portion you own? Do not deduct secured claims or exemptions.
■ No			home, in a safe deposit bo	ox, and on hand when you file your petit	ion
Example			counts; certificates of dep nts with the same institution	osit; shares in credit unions, brokerage on, list each.	houses, and other similar
			Institution name:		
	17.	1. Savings	Huntington B	ank	\$400.00
	17.2	2. Checking	Huntington B	ank	\$100.00
	mutual funds, or pub es: Bond funds, invest		orokerage firms, money m	arket accounts	
☐ Yes		Institution or issue	er name:		
joint ve ■ No	nture			ated businesses, including an intere	st in an LLC, partnership, and
☐ Yes. 0	Give specific information	an about them			
Official Form	•	on about them	 Schedule A/B: Prope	rtv	page 3

Filed 03/29/18 Case 18-20766-JAD Doc 14 Entered 03/29/18 08:27:29 Desc Main Page 6 of 42 Document Case number (if known) 18-20766 Debtor 1 Cheryl A. Bach Name of entity: % of ownership: 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them.  $\hfill \square$  Yes. Give specific information about them Issuer name: 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans ■ No ☐ Yes. List each account separately. Type of account: Institution name: 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others ■ No Institution name or individual: ☐ Yes. ..... 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) ■ No Issuer name and description. ☐ Yes..... 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). ■ No Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): ☐ Yes..... 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit No ☐ Yes. Give specific information about them... 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements ☐ Yes. Give specific information about them... 27. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses No ☐ Yes. Give specific information about them... Money or property owed to you? Current value of the portion you own? Do not deduct secured claims or exemptions. 28. Tax refunds owed to you ■ No ☐ Yes. Give specific information about them, including whether you already filed the returns and the tax years......

29. Family support

Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement

☐ Yes. Give specific information.....

### 30. Other amounts someone owes you

Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else

■ No

☐ Yes. Give specific information..

Case 18-20766-JAD Doc 14 Filed 03/29/18 Entered 03/29/18 08:27:29 Desc Main Document Page 7 of 42

Case number (if known) 18-20766 Debtor 1 Cheryl A. Bach 31. Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance No ☐ Yes. Name the insurance company of each policy and list its value. Company name: Beneficiary: Surrender or refund value: 32. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. ■ No ☐ Yes. Give specific information.. 33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue ■ No ☐ Yes. Describe each claim....... 34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims ☐ Yes. Describe each claim....... 35. Any financial assets you did not already list ■ No ☐ Yes. Give specific information... 36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached \$500.00 for Part 4. Write that number here..... Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1. 37. Do you own or have any legal or equitable interest in any business-related property? No. Go to Part 6. ☐ Yes. Go to line 38. Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1. 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? No. Go to Part 7. ☐ Yes. Go to line 47. Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership ☐ Yes. Give specific information.......

Official Form 106A/B Schedule A/B: Property page 5

54. Add the dollar value of all of your entries from Part 7. Write that number here ......

\$0.00

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Case number (if known) 18-20766 Debtor 1 Cheryl A. Bach Part 8: List the Totals of Each Part of this Form Part 1: Total real estate, line 2 \$150,000.00 Part 2: Total vehicles, line 5 \$0.00 57. Part 3: Total personal and household items, line 15 \$9,050.00 Part 4: Total financial assets, line 36 \$500.00 Part 5: Total business-related property, line 45 59. \$0.00 60. Part 6: Total farm- and fishing-related property, line 52 \$0.00 Part 7: Total other property not listed, line 54 \$0.00 61. Total personal property. Add lines 56 through 61... \$9,550.00 Copy personal property total \$9,550.00 63. Total of all property on Schedule A/B. Add line 55 + line 62 \$159,550.00

Official Form 106A/B Schedule A/B: Property page 6

		8 0 0 0 0 1111	3111 1 616 6 6 6 1	
Fill in this inform	mation to identify your	case:		
Debtor 1	Cheryl A. Bach			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	inkruptcy Court for the:	WESTERN DISTRICT (	OF PENNSYLVANIA	
Case number	18-20766			
(if known)				

### Official Form 106C

### Schedule C: The Property You Claim as Exempt

1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B*: *Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2*: *Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

	☐ You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)					
	■ You are claiming federal exemptions. 11	U.S.C. § 522(b)(2)				
2.	For any property you list on Schedule A/B	that you claim as exe	empt,	fill in the information below.		
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption	
		Copy the value from Schedule A/B	Che	ck only one box for each exemption.		
	Misc. household furnishings Line from Schedule A/B: 6.1	\$3,500.00		\$3,500.00	11 U.S.C. § 522(d)(3)	
	Line Ironi Schedule A/B. 0.1			100% of fair market value, up to any applicable statutory limit		
	Small household appliances Line from Schedule A/B: 6.2	\$150.00		\$150.00	11 U.S.C. § 522(d)(3)	
	Line Ironi Scriedule A/B. 0.2			100% of fair market value, up to any applicable statutory limit		
	4 TV's, 2 DVD players, laptop computer, X-Box, clock radio, digital	\$1,800.00		\$1,800.00	11 U.S.C. § 522(d)(3)	
	camera Line from Schedule A/B: 6.3			100% of fair market value, up to any applicable statutory limit		
	Lawn mower and misc. gardening tools	\$300.00		\$300.00	11 U.S.C. § 522(d)(3)	
	Line from Schedule A/B: 6.4			100% of fair market value, up to any applicable statutory limit		
	Framed pictures Line from Schedule A/B: 6.5	\$150.00	•	\$150.00	11 U.S.C. § 522(d)(3)	
	Line Ironi Schedule A/D. <b>0.3</b>			100% of fair market value, up to any applicable statutory limit		

Case 18-20766-JAD Doc 14 Filed 03/29/18 Entered 03/29/18 08:27:29 Desc Main Document Page 10 of 42

Debtor 1 Cheryl A. Bach Page 10 of 42

Case number (if known) 18-20766

Onory A. Buon				10 20100
Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Am	ount of the exemption you claim	Specific laws that allow exemption
	Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
Knick knacks Line from Schedule A/B: 6.6	\$100.00		\$100.00	11 U.S.C. § 522(d)(3)
			100% of fair market value, up to any applicable statutory limit	
Golf clubs Line from Schedule A/B: 9.1	\$250.00		\$250.00	11 U.S.C. § 522(d)(5)
			100% of fair market value, up to any applicable statutory limit	
Clothing Line from Schedule A/B: 11.1	\$800.00	•	\$800.00	11 U.S.C. § 522(d)(3)
Line from <i>Schedule AVB</i> .			100% of fair market value, up to any applicable statutory limit	
Jewelry Line from Schedule A/B: 12.1	\$2,000.00		\$1,600.00	11 U.S.C. § 522(d)(4)
Line Ironi Schedule A.B. 12.1			100% of fair market value, up to any applicable statutory limit	
Jewelry Line from Schedule A/B: 12.1	\$2,000.00		\$400.00	11 U.S.C. § 522(d)(5)
Line Iron Schedule AVB. 12.1			100% of fair market value, up to any applicable statutory limit	
Savings: Huntington Bank Line from Schedule A/B: 17.1	\$400.00		\$400.00	11 U.S.C. § 522(d)(5)
Line nom ochedate ALD.			100% of fair market value, up to any applicable statutory limit	
Checking: Huntington Bank Line from Schedule A/B: 17.2	\$100.00		\$100.00	11 U.S.C. § 522(d)(5)
Ellie IIolii ochedale Alb. 11.2			100% of fair market value, up to any applicable statutory limit	
Are you claiming a homestead exemption     (Subject to adjustment on 4/01/19 and even     ■ No			iled on or after the date of adjustme	nt.)
☐ Yes. Did you acquire the property cov☐ No☐ Yes	ered by the exemption w	ithin 1	,215 days before you filed this case	?

		Document	Page 11	1 of 42		
Fill in this information	n to identify you	r case:				
Debtor 1 C	heryl A. Bach					
	st Name	Middle Name	Last Name			
Debtor 2						
(Spouse if, filing) Fire	st Name	Middle Name	Last Name			
United States Bankrup	tcy Court for the:	WESTERN DISTRICT OF PENI	NSYLVANIA			
Case number 18-20	1766					
(if known)	7700				☐ Check	if this is an
						ded filing
Official Forms 40	)CD					J
Official Form 10		Who Have Claims S	Socuro	d by Proport	v	12/15
Scriedule D.	Creditors	WITO Have Claims	<del>secure</del>	u by Propert	у	12/15
		If two married people are filing togethe out, number the entries, and attach it to				
. Do any creditors have	claims secured by	your property?				
☐ No. Check this	box and submit th	nis form to the court with your other:	schedules. Y	ou have nothing else t	o report on this form.	
Yes. Fill in all of		,		and the same of th		
		Delow.				
Part 1: List All Sec	ured Claims			Column A	Column B	Column C
		nore than one secured claim, list the cred		/		Unsecured
		a particular claim, list the other creditors cal order according to the creditor's name		Amount of claim Do not deduct the	Value of collateral that supports this	portion
O. d. Damle of Amon		Describe the surrounded that a course the	h a alaine.	value of collateral.	claim	If any
2.1 Bank of Ameri Creditor's Name	ica	Describe the property that secures the		\$150,000.00	\$150,000.00	\$0.00
Oreditor 3 Name		5836 Shirley Drive Bethel Pa 15102 Allegheny County	rk, PA			
7105 Corporat	e Drive	As of the date you file, the claim is:	heck all that			
Plano, TX 750		apply.  Contingent				
Number, Street, City, S		☐ Unliquidated				
	·	☐ Disputed				
Who owes the debt?	Check one.	Nature of lien. Check all that apply.				
■ Debtor 1 only		☐ An agreement you made (such as m	nortgage or se	cured		
Debtor 2 only		car loan)				
Debtor 1 and Debtor 2	2 only	☐ Statutory lien (such as tax lien, mec	hanic's lien)			
☐ At least one of the deb	otors and another	☐ Judgment lien from a lawsuit				
☐ Check if this claim re	elates to a	Other (including a right to offset)	Mortgage			
community debt		, , , , _				
Date debt was incurred		Last 4 digits of account numb	er <b>5604</b>			
		-				
Add the dollar value of	f your entries in C	olumn A on this page. Write that numb	er here:	\$150,00	00.00	
		the dollar value totals from all pages.		\$150,00	00.00	
Write that number her	e:			<b>V</b> 100,00		
Part 2: List Others t	o Be Notified fo	r a Debt That You Already Listed				
Use this page only if you	u have others to be	e notified about your bankruptcy for a	debt that you	already listed in Part 1.	For example, if a collec	tion agency is
trying to collect from yo	u for a debt you og y of the debts that	we to someone else, list the creditor in you listed in Part 1, list the additional	n Part 1, and t	then list the collection a	gency here. Similarly, if	you have more
		7' 0 1			_	
Name, Number, Sinora C. Viggi	treet, City, State & 2	zib Code	On whi	ich line in Part 1 did you e	nter the creditor? 2.1	
KML Law Gro			last 4	digits of account number		
	/ Independenc	e Center	Edot 4 (			
701 Market St Philadelphia,	treet					

`	543C 10 20100 011B	Document Document	Page 1	2 of 42	JO.21.25 I	Jeso Man
Fill in this	s information to identify your ca		0.00			
Debtor 1	Cheryl A. Bach					
Debtor 1	First Name	Middle Name	Last Name			
Debtor 2						
(Spouse if, fil	ling) First Name	Middle Name	Last Name			
United Sta	ates Bankruptcy Court for the:	WESTERN DISTRICT OF PI	ENNSYLVANIA	ı		
Casa num	ohor 40 20700					
(if known)	nber <u>18-20766</u>				По	check if this is an
, ,						mended filing
						· ·
	Form 106E/F					
Sched	ule E/F: Creditors Wh	no Have Unsecured	d Claims			12/15
Schedule D left. Attach name and c	6: Executory Contracts and Unexpir b: Creditors Who Have Claims Secur the Continuation Page to this page case number (if known).	red by Property. If more space i If you have no information to I	s needed, copy t	the Part you need, fill it o	ut, number the en	tries in the boxes on the
Part 1:	List All of Your PRIORITY Uns					
1. Do any	y creditors have priority unsecured	claims against you?				
■ No.	. Go to Part 2.					
☐ Yes	s.					
Part 2:	List All of Your NONPRIORITY	Unsecured Claims				
3. Do an	y creditors have nonpriority unsecu	red claims against you?				
□ No.	. You have nothing to report in this par	t. Submit this form to the court wi	th your other sche	edules.		
■ Yes	S.					
		ma in the clubabatical ander of	4h a avaditavh a	halda aaah alaim 16		
unsecu	Il of your nonpriority unsecured clai ured claim, list the creditor separately t ne creditor holds a particular claim, list	or each claim. For each claim list	ed, identify what t	type of claim it is. Do not lis	t claims already inc	luded in Part 1. If more
						Total claim
4.1 <b>C</b>	Sapital One	Last 4 digits of a	ccount number	0349		\$510.00
	onpriority Creditor's Name					
	O Box 30285 Falt Lake City, UT 84130	When was the de	bt incurred?			-
N	umber Street City State Zlp Code	As of the date yo	u file, the claim i	is: Check all that apply		
	/ho incurred the debt? Check one.					
	Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	Debtor 1 and Debtor 2 only	☐ Disputed				
	At least one of the debtors and anoth		ORITY unsecured	d claim:		
	Check if this claim is for a comm	unity				
	ebt			ration agreement or divorce	e that you did not	
_	the claim subject to offset?	report as priority of			1-1-4-	
	No	☐ Debts to pension	•	g plans, and other similar o	debts	
	Yes	Other. Specify	Gas, food,	household goods		

Page 13 of 42 Document Debtor 1 Cheryl A. Bach Case number (if know) 18-20766 4.2 **Capital One** Last 4 digits of account number \$1,976.00 Nonpriority Creditor's Name PO Box 30285 When was the debt incurred? Salt Lake City, UT 84130 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community  $\hfill\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Gas, food, clothes, household goods ☐ Yes 4.3 **Capital One** Last 4 digits of account number 5063 \$2,553.00 Nonpriority Creditor's Name PO Box 30285 When was the debt incurred? Salt Lake City, UT 84130 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\hfill\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No Gas, food, clothes, household goods, auto ☐ Yes Other. Specify care, to pay bills Last 4 digits of account number 4.4 **Comenity Bank/HSN** 8901 \$1,782.00 Nonpriority Creditor's Name PO Box 182120 When was the debt incurred? Columbus, OH 43218 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not

■ No

☐ Yes

report as priority claims

 $\square$  Debts to pension or profit-sharing plans, and other similar debts

■ Other. Specify Household goods

Is the claim subject to offset?

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Document Page 14 of 42 Debtor 1 Cheryl A. Bach Case number (if know) 18-20766 4.5 Comenity Bank/New York & Co. Last 4 digits of account number 2402 \$552.00 Nonpriority Creditor's Name PO Box 182789 When was the debt incurred? Columbus, OH 43218 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ■ Other. Specify Clothes 4.6 **Credit One Bank** Last 4 digits of account number \$302.00 Nonpriority Creditor's Name PO Box 98873 When was the debt incurred? Las Vegas, NV 89193 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ☐ Disputed ☐ Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans  $\square$  Check if this claim is for a community debt  $oxed{\square}$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims  $\square$  Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Gas, food ☐ Yes **Educational Credit Management** 0236 \$41,412.00 4.7 Last 4 digits of account number Corp Nonpriority Creditor's Name 111 Washington Ave S, Ste 1400 When was the debt incurred? Minneapolis, MN 55401 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent ☐ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only

☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Student loans ☐ Yes

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Debtor 1 Cheryl A. Bach Case number (if know) 18-20766 4.8 Kohls/Capital One Last 4 digits of account number 1033 \$227.00 Nonpriority Creditor's Name PO Box 3115 When was the debt incurred? Milwaukee, WI 53201 As of the date you file, the claim is: Check all that apply Number Street City State Zlp Code Who incurred the debt? Check one. ■ Debtor 1 only □ Contingent Debtor 2 only ☐ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: lacksquare At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\hfill\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Clothes ☐ Yes

### Part 3: List Others to Be Notified About a Debt That You Already Listed

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

### Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				7	Total Claim
	6a.	Domestic support obligations	6a.	\$	0.00
Total claims					
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$	0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	0.00
	01	On the Advance	01		Total Claim
Total	6f.	Student loans	6f.	\$	0.00
claims from Part 2	6g.	Obligations arising out of a separation agreement or divorce that			
Holli Part 2	og.	you did not report as priority claims	6g.	\$	0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
	6i.	<b>Other.</b> Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	49,314.00
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	49,314.00

		Beganne	<u> </u>	
Fill in this info	rmation to identify your	case:		
Debtor 1	Cheryl A. Bach			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States E	Bankruptcy Court for the:	WESTERN DISTRICT C	DF PENNSYLVANIA	
Case number	18-20766			
(if known)				☐ Check if this is an amended filing

### Official Form 106G

### Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

ı	Person or	company with	whom you have th , Street, City, State and ZIF	e contract or lease	State what the contract or lease is for
2.1					
	Name				
	Number	Street			
	City		State	ZIP Code	
2.2					
	Name				
	Number	Street			
	City		State	ZIP Code	_
2.3	Oity		Otate	Zii Oode	
	Name				
	Number	Street			
	City		State	ZIP Code	<u> </u>
2.4					
	Name				
	Number	Street			_
	City		State	ZIP Code	_
2.5					
	Name				
	Number	Street			<u> </u>
	City		State	ZIP Code	_

		Docume	ent Page 17 c	of 42	
Fill in this	information to identify your	case:			
Debtor 1	Cheryl A. Bach				
<b>5</b> 1 5	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, fili	ng) First Name	Middle Name	Last Name		
United Sta	ates Bankruptcy Court for the:	WESTERN DISTRICT	OF PENNSYLVANIA		
Office Oto	aco Bankruptoy Court for the.	WEGTERRY DIGITALOT	OF TENNOTEVANA		
Case num	ber 18-20766			Chook if this is a	
(ii Kilowii)				Check if this is a mended filing	ווג
Officia	l Form 106H				
Sched	lule H: Your Cod	ebtors			12/15
your name	e and case number (if known) you have any codebtors? (If	. Answer every question	1.	as a codebtor.	,
■ No □ Yes	S				
Arizor 	na, California, Idaho, Louisiana			ry? (Community property states and territories incluington, and Wisconsin.)	de
	. Go to line 3. s. Did your spouse, former spo	use, or legal equivalent liv	e with you at the time?		
in line Form out C	e 2 again as a codebtor only i	f that person is a guarar	ntor or cosigner. Make	r if your spouse is filing with you. List the person sure you have listed the creditor on Schedule D (6G). Use Schedule D, Schedule E/F, or Schedule Column 2: The creditor to whom you owe the	(Official e G to fill
	Name, Number, Street, City, State and Z	IP Code		Check all schedules that apply:	io dobt
3.1				☐ Schedule D, line	
	Name			☐ Schedule E/F, line	
				☐ Schedule G, line	
-	Number Street City	State	ZIP Code	_	
3.2				☐ Schedule D, line	
	Name			☐ Schedule E/F, line	
				☐ Schedule G, line	
-	Number Street			_	
	City	State	ZIP Code		

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Fill	in this information to identify you	r case:				
Deb	otor 1 Cheryl A.	Bach				
1 .	otor 2 uuse, if filing)					
Uni	ted States Bankruptcy Court for	the: WESTERN DISTRIC	T OF PENNSYLVANIA			
1	se number 18-20766		-	Check if this is:  ☐ An amended filing ☐ A supplement showing postpetition chapter		
$\bigcirc$	fficial Form 1061			13 income as of the following date:		
	fficial Form 106I			MM / DD/ YYYY		
	chedule I: Your In			12/15 Debtor 2), both are equally responsible for		
Par	Describe Employme			e number (if known). Answer every question.		
	information.		Debtor 1	Debtor 2 or non-filing spouse		
	If you have more than one job, attach a separate page with	Employment status	■ Employed	■ Employed		
	information about additional employers.		☐ Not employed	☐ Not employed		
		Occupation	Instructor	<u>IT</u>		
	Include part-time, seasonal, or self-employed work.	Employer's name	Career Systems Development Corporation	Warner Telecomm LTD		
	Occupation may include studer or homemaker, if it applies.	Employer's address	75 Thruway Park Drive, Ste 100 West Henrietta, NY 14586	222 Yardley Way PO Box 90036 Pittsburgh, PA 15206		
		How long employed t	here? 4 years			
Par	t 2: Give Details About N	Ionthly Income				
	mate monthly income as of the use unless you are separated.	e date you file this form. If	you have nothing to report for any line, v	write \$0 in the space. Include your non-filing		
	u or your non-filing spouse have e space, attach a separate sheet		ombine the information for all employers	for that person on the lines below. If you need		

List monthly gross wages, salary, and commissions (before all payroll 2. deductions). If not paid monthly, calculate what the monthly wage would be.

Estimate and list monthly overtime pay.

Calculate gross Income. Add line 2 + line 3.

3,967.38 2,791.66 +\$ 0.00 0.00 +\$ 2,791.66 3,967.38

Official Form 106I Schedule I: Your Income page 1

Deb	tor 1	Cheryl A. Bach		C	Case	number (if known)	_1	8-2076	6		
					For	Debtor 1		For Del			
	Cop	y line 4 here	4.		\$	3,967.38		non-fili \$		791.66	
5.	l ict	all payroll deductions:			_	<u> </u>					-
J.		• •	<b>-</b> -		Φ	4 004 00		Φ		- 40 04	
	5a. 5b.	Tax, Medicare, and Social Security deductions Mandatory contributions for retirement plans	5a 5b		\$_ \$	1,024.99		\$	;	548.04	_
	5c.	Voluntary contributions for retirement plans	5c		<b>\$</b> -	0.00		\$		0.00	_
	5d.	Required repayments of retirement fund loans	5d		\$ _	0.00		\$		0.00	_
	5e.	Insurance	5e		<b>\$</b> -	132.02		\$		0.00 239.54	
	5f.	Domestic support obligations	5f.		$^{*}$	0.00		\$		0.00	_
	5g.	Union dues	5g		<u>*</u> —	0.00		\$		0.00	_
	5h.	Other deductions. Specify:	5h		<u>*</u> —	0.00		\$		0.00	_
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	_ 6.		* — \$	1,157.01		\$	-	787.58	_
7.		culate total monthly take-home pay. Subtract line 6 from line 4.	7.		* — \$	2,810.37		\$		004.08	-
8.		all other income regularly received:	۲.		Ψ	2,010.37		Ψ		JU4.UO	_
	8a.	Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross									
		receipts, ordinary and necessary business expenses, and the total									
		monthly net income.	8a		\$	0.00		\$		0.00	
	8b.	Interest and dividends	8b		\$_	0.00		\$		0.00	-
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce									
		settlement, and property settlement.	8c		\$	0.00		\$		0.00	
	8d.	Unemployment compensation	8d		\$_	0.00		\$		0.00	-
	8e.	Social Security	8e	٠.	\$	0.00		\$		0.00	_
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	8f.		\$	0.00		\$		0.00	
	8g.	Pension or retirement income	– 8g		<u>\$</u> -	0.00		\$		0.00	_
	8h.	Other monthly income. Specify:	8h		<b>\$</b> -	0.00		·		0.00	_
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	_ 9.	\$	- 3	0.00	Г	\$		0.0	_
			г	L					_		
10.	Cald	culate monthly income. Add line 7 + line 9.	10.	\$		2,810.37 + \$		2,004	.08	= \$	4,814.45
	Add	the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.									
11.	Inclu othe	e all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your or friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not a cify:	depe			•		l in <i>Sche</i>	edule 11.		0.00
12.		the amount in the last column of line 10 to the amount in line 11. The rest e that amount on the Summary of Schedules and Statistical Summary of Certain ies						f it	12.	\$	4,814.45
										Combi monthl	ned y income
13.	Do y	/ou expect an increase or decrease within the year after you file this form? No.	?								
	$\overline{}$	Yes Explain:					_				

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Fill	in this informa	ation to identify yo	our case:					
Deb	tor 1	Cheryl A. Ba	ach			Ch	eck if this is:	
					_		_	
	otor 2							wing postpetition chapter
(Spo	ouse, if filing)						13 expenses as of	f the following date:
Unit	ed States Bank	ruptcy Court for the	: WESTE	ERN DISTRICT OF PENNS	SYLVANIA		MM / DD / YYYY	
Cas	e number 1	8-20766						
(If kı	nown)							
Of	fficial Fo	orm 106J						
			 Evnor	NCOC				40/45
		J: Your		ISES . If two married people ar	- Clin - ( ( b b -	. 41		12/15
info	ormation. If medical m		eded, atta ry question	ch another sheet to this				
1.	Is this a joi	nt case?						
	■ No. Go to	o line 2. es Debtor 2 live	in a separ	ate household?				
	_ 100.20		а сора					
			st file Offici	al Form 106J-2, <i>Expenses</i>	for Separate House	hold of D	ebtor 2.	
2.	Do you hav	e dependents?	■ No					
	Do not list D Debtor 2.	ebtor 1 and	☐ Yes.	Fill out this information for each dependent	Dependent's relation Debtor 1 or Debtor		Dependent's age	Does dependent live with you?
	Do not state	the						□ No
	dependents	names.						☐ Yes
								□ No
								☐ Yes
								□ No
								☐ Yes
								□ No
								☐ Yes
3.	expenses of	penses include of people other t d your depende	than 🗂	No Yes				
Par		nate Your Ongoi		y Expenses				
exp		a date after the		uptcy filing date unless y y is filed. If this is a supp				
Incl	lude expense	es paid for with	non-cash	government assistance i	you know			
	value of suc ficial Form 10		d have inc	cluded it on <i>Schedule I:</i> Y	our Income		Your exp	penses
4.		or home owners nd any rent for th		ses for your residence. In or lot.	nclude first mortgage		\$	0.00
	If not include	ded in line 4:						
	4a. Real	estate taxes				4a.	\$	0.00
	4b. Prope	erty, homeowner's	s, or renter	's insurance		4b.	\$	0.00
	4c. Home	e maintenance, re	epair, and ι	ıpkeep expenses		4c.	\$	150.00
		eowner's associa				4d.	· ·	0.00
5	Additional	mortagae navm	onte for ve	nur residence such as ho	me equity loans	5	\$	0.00

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Deb	otor 1	Cheryl A. E	Bach		Case	num	ber (if known)	18-20766
6.	Utilit	ies:						
	6a.		eat, natural gas			6a.	\$	350.00
	6b.	Water, sewe	r, garbage collection			6b.	\$	75.00
	6c.	Telephone, o	cell phone, Internet, s	atellite, and cable services		6c.	\$	425.00
	6d.	Other. Speci	fy:			6d.	\$	0.00
7.	Food	and housek	eeping supplies			7.	\$	600.00
8.	Child	dcare and chi	dren's education co	osts		8.	\$	0.00
9.			and dry cleaning			9.	\$	50.00
10.	Pers	onal care pro	ducts and services			10.	\$	75.00
		cal and denta				11.	\$	300.00
			clude gas, maintenar	ice, bus or train fare.				
		ot include car		,		12.	\$	300.00
13.	Ente	rtainment, clu	ıbs, recreation, new	spapers, magazines, and bool	(S	13.	\$	150.00
14.	Char	itable contrib	utions and religious	donations		14.	\$	0.00
15.	Insur							
				your pay or included in lines 4 o				
		Life insurance				15a.	·	0.00
		Health insura				15b.	·	0.00
		Vehicle insur				15c.	· -	75.00
		Other insura	· · ·			15d.	\$	0.00
16.			ide taxes deducted fr	om your pay or included in lines	4 or 20.			
	Spec					16.	\$	0.00
17.			se payments:			4 - 7 -	Φ.	0.00
			s for Vehicle 1			17a.	·	0.00
			s for Vehicle 2			17b.	·	0.00
		Other. Speci				17c.	·	0.00
		Other. Speci				17d.	\$	0.00
18.				nce, and support that you did r		18.	\$	0.00
10				nedule I, Your Income (Official others who do not live with you		10.	Ψ	0.00
13.	Spec		ou make to support	others who do not live with yo	u.	19.	Ψ	0.00
20		·	v evnenses not incl	uded in lines 4 or 5 of this forn	n or on Schedule		our Income	
20.			n other property	uded in lines 4 of 5 of this form		20a.		0.00
		Real estate t				20b.	·	0.00
			meowner's, or renter's	s insurance		20c.		0.00
			, repair, and upkeep			20d.	·	0.00
			s association or cond	•		20e.	·	0.00
21			Pet food for 4 dog		•	21.	·	150.00
21.	Otilio	Topechy.	reciood for 4 dog	<u>js</u>		۷.,	- Ψ	130.00
22.	Calc	ulate your mo	onthly expenses					
	22a.	Add lines 4 th	ough 21.				\$	2,700.00
	22b.	Copy line 22 (	monthly expenses for	Debtor 2), if any, from Official F	orm 106J-2		\$	
	22c.	Add line 22a a	nd 22b. The result is	your monthly expenses.			\$	2,700.00
								<u> </u>
23.		•	onthly net income.	<i></i>	,		•	
			1.5	thly income) from Schedule I.		23a.	·	4,814.45
	23b.	Copy your m	onthly expenses from	i line 22c above.	2	23b.	-\$	2,700.00
	22-	Cubtra at	r manthly company of	rom vous monthly in the				
	23c.			rom your monthly income.		23c.	\$	2,114.45
		THE TESUIT IS	your monthly net inco	JIII <del>C</del> .	•	_00.	*	_,
24.	Do v	ou expect an	increase or decreas	e in your expenses within the	vear after vou file	this	form?	
	For ex	kample, do you e	expect to finish paying for	r your car loan within the year or do				ease or decrease because of a
			ms of your mortgage?			- '	•	
	■ No	0.						
	□Y€	es. E	xplain here:					

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Fill in this inf	formation to identify your	case:			
Debtor 1	Cheryl A. Bach				
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name		
United States	Bankruptcy Court for the:	WESTERN DISTRICT	OF PENNSYLVANIA		
Case number	18-20766				
(if known)					☐ Check if this is an amended filing
Official Fo	orm 106Dec				
Declara	ation About a	ın Individual	<b>Debtor's Scl</b>	nedules	12/15
If two married	I people are filing togethe	r, both are equally respo	nsible for supplying corre	ect information.	
obtaining mo		n connection with a ban			ement, concealing property, or 10, or imprisonment for up to 20
s	Sign Below				
Did you	pay or agree to pay some	one who is NOT an atto	rney to help you fill out ba	inkruptcy forms?	
■ No					
☐ Yes	s. Name of person				kruptcy Petition Preparer's Notice, , and Signature (Official Form 119)
•	enalty of perjury, I declare are true and correct.	that I have read the sum	nmary and schedules filed	with this declaration	on and

X /s/ Cheryl A. Bach

Cheryl A. Bach Signature of Debtor 1

Date March 29, 2018

Signature of Debtor 2

Date

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Fill in	this inforn	nation to identify you	ır case:			
Debtor	r 1	Cheryl A. Bach				
		First Name	Middle Name	Last Name		
Debtor (Spouse		First Name	Middle Name	Last Name		
United	States Ba	nkruptcy Court for the	WESTERN DISTRICT O	F PENNSYLVANIA		
		initiapley Court for the				
Case r (if known		18-20766			-	Check if this is an Imended filing
Ott: -	:-!	40 <b>7</b>				
		rm 107 of Financial	Affairs for Indivi	duals Filing for B	ankruptcy	4/1
informa	ation. If m r (if know	ore space is needed n). Answer every que	, attach a separate sheet to	this form. On the top of an	equally responsible for sup y additional pages, write you	plying correct ur name and case
		r current marital stat		a Lived Belole		
	Married Not mai	ried				
2. Du	uring the la	ast 3 vears. have vou	lived anywhere other than	where you live now?		
	<b>g</b>	, , ,	<b>,</b>	,		
	No Yes. Lis	t all of the places you	lived in the last 3 years. Do n	ot include where you live nov	v.	
D	ebtor 1 Pr	ior Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ac	ldress:	Dates Debtor 2 lived there
					nity property state or territory ico, Texas, Washington and V	
	No					
	Yes. Ma	ake sure you fill out <i>Sc</i>	hedule H: Your Codebtors (O	fficial Form 106H).		
Part 2	Evnlai	n the Sources of You	ır İncome			
T art 2	Ехріаі	Title Cources of To	ar meetine			
Fil	I in the tota	al amount of income yo	mployment or from operatir ou received from all jobs and a u have income that you receiv	all businesses, including part		ndar years?
	l No					
	Yes. Fil	l in the details.				
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
		year before that: ecember 31, 2016)	■ Wages, commissions, bonuses, tips	\$81,912.00	☐ Wages, commissions, bonuses, tips	,
			☐ Operating a business		☐ Operating a business	

Official Form 107

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Debtor 1	Cheryl A. Bach	Document	Case number (if known)	18-20766	

				Debtor 1				Debtor 2		
					of income that apply.	(befo	s income re deductions and sions)	Sources of ince Check all that a		Gross income (before deductions and exclusions)
	r the caler anuary 1 to	ndar year: o December	31, 2015 )	■ Wages bonuses,	s, commissions, tips		\$81,390.00	☐ Wages, combonuses, tips	missions,	
				☐ Opera	ting a business			☐ Operating a l	ousiness	
5.	Include ir and other winnings.  List each	ncome regard r public bene If you are fil	dless of whet fit payments; ling a joint ca the gross inco	her that inco pensions; re se and you l	ome is taxable. Ex ental income; inte nave income that	amples o rest; divid you recei	dends; money colle ved together, list it	alimony; child suppo	royalties; and btor 1.	curity, unemployment, gambling and lottery
				51/ 4				51/ 6		
				Debtor 1 Sources of Describe I	of income pelow.	each (before	s income from source re deductions and sions)	Sources of inco Describe below.		Gross income (before deductions and exclusions)
	rt 3: Lis				ore You Filed for					
		individual  During the No.  Yes  * Subject  Debtor 1 During the No.  Yes	primarily for a 90 days before Go to line 7 List below paid that continct adjustment or Debtor 2 of 90 days before Go to line 7 List below include pay attorney for the source of the so	a personal, fore you filed 7.  each creditoreditor peditor. Do not payments to 14/01/19  or both have preyou filed 7.  each creditor.	amily, or househor for bankruptcy, d or to whom you pa ot include payme o an attorney for to and every 3 year e primarily consi for bankruptcy, d or to whom you pa omestic support of uptcy case.	old purposed id you particularly a total of the control of the con	y any creditor a total of \$6,425* or more mestic support oblitation cases filed or ots. y any creditor a total of \$600 or more an s, such as child sup	al of \$6,425* or more in one or more pay gations, such as che or after the date of all of \$600 or more?	e? ments and th ild support ar f adjustment.  you paid that also, do not in	creditor. Do not clude payments to an
	Creditor	r's Name an	d Address		Dates of payme	ent	Total amount paid	Amount you still owe	was this p	ayment for
7. Within 1 year before you filed for bank Insiders include your relatives; any gene of which you are an officer, director, pers a business you operate as a sole proprie alimony. No				general par r, person in proprietor. 11	tners; relatives of control, or owner	any geno of 20% o	eral partners; partners partner more of their votin	erships of which you g securities; and an	u are a gener y managing a	al partner; corporations agent, including one for
			ments to an ir	nsider.						
	Insider's	s Name and	Address		Dates of payme	ent	Total amount paid	Amount you still owe	Reason for	this payment

Case 18-20766-JAD Doc 14 Filed 03/29/18 Entered 03/29/18 08:27:29 Desc Main Page 25 of 42 Document Case number (if known) 18-20766 Debtor 1 Cheryl A. Bach Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider? Include payments on debts guaranteed or cosigned by an insider. No Yes. List all payments to an insider Insider's Name and Address **Total amount** Amount you Reason for this payment Dates of payment paid still owe Include creditor's name Part 4: Identify Legal Actions, Repossessions, and Foreclosures Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. ☐ No Yes. Fill in the details. Case title Nature of the case Court or agency Status of the case Case number Bank of America N.A. **Foreclosure Court of Common Pleas of** □ Pending Allegheny Co. □ On appeal **Chery Hanych** Pittsburgh, PA 15219 □ Concluded mg-17-001365 Sheriff Sale for April 2, 2018 stayed by bankruptcy filing 10. Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. No. Go to line 11. Yes. Fill in the information below. **Creditor Name and Address Describe the Property** Value of the Date property Explain what happened 11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt? Nο Yes. Fill in the details. **Creditor Name and Address** Describe the action the creditor took

Official Form 107

Nο

per person

Address:

п Yes

12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a

13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person?

Describe the gifts

Value

Amount

court-appointed receiver, a custodian, or another official?

List Certain Gifts and Contributions

Yes. Fill in the details for each gift. Gifts with a total value of more than \$600

Person to Whom You Gave the Gift and

Date action was

Dates you gave

the gifts

taken

Case 18-20766-JAD Doc 14 Filed 03/29/18 Entered 03/29/18 08:27:29 Desc Main Page 26 of 42 Document Case number (if known) 18-20766 Debtor 1 Cheryl A. Bach 14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity? Yes. Fill in the details for each gift or contribution. Gifts or contributions to charities that total Describe what you contributed Dates you Value more than \$600 contributed Charity's Name Address (Number, Street, City, State and ZIP Code) Part 6: List Certain Losses 15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling? Nο п Yes. Fill in the details. Describe the property you lost and Describe any insurance coverage for the loss Date of your Value of property how the loss occurred loss lost Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. Part 7: List Certain Payments or Transfers 16. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy. Yes. Fill in the details. Person Who Was Paid Description and value of any property Date payment Amount of Address transferred or transfer was payment Email or website address made Person Who Made the Payment, if Not You **Attorney Fees** 12-2-17, \$500.00 M. Eisen & Associates, P.C. 6200 Babcock Blvd \$500.00 Pittsburgh, PA 15237 1-28-18, \$500.00 attorneyeisen@yahoo.com

17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors?

Do not include any payment or transfer that you listed on line 16.

No

Yes. Fill in the details.

Person Who Was Paid

Address

Description and value of any property transferred

Date payment or transfer was payment made

18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs?

Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement.

No

☐ Yes. Fill in the details.

Person Who Received Transfer Address Person's relationship to you Description and value of property transferred

Describe any property or payments received or debts paid in exchange

Date transfer was made

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Debtor 1	Chervl A. Bach	Case number (if known)	18-2076

19.	Within 10 years before you filed for bankrupto beneficiary? (These are often called asset-prote		y property to a	self-settle	ed trust or similar device	of which you are a
	No Yes. Fill in the details.					
	Name of trust	Description and v	alue of the pro	perty trans	sferred	Date Transfer was made
Pa	rt 8: List of Certain Financial Accounts, Inst	ruments, Safe Deposit	t Boxes, and St	orage Uni	ts	
20.	Within 1 year before you filed for bankruptcy, sold, moved, or transferred? Include checking, savings, money market, or houses, pension funds, cooperatives, associ	other financial accou	nts; certificates	of deposi		, ,
	No The state of th					
	Yes. Fill in the details.		_			
		Last 4 digits of account number	Type of accoinstrument	unt or	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
21.	Do you now have, or did you have within 1 ye cash, or other valuables?	ear before you filed for	bankruptcy, a	ny safe de	posit box or other depos	itory for securities,
	■ No □ Yes. Fill in the details.					
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had acc Address (Number, S State and ZIP Code)		Describe	the contents	Do you still have it?
22.	Have you stored property in a storage unit or	place other than your	home within 1	year befo	re you filed for bankrupt	cy?
	■ No □ Yes. Fill in the details.					
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or h to it? Address (Number, S State and ZIP Code)		Describe	the contents	Do you still have it?
Pai	rt 9: Identify Property You Hold or Control fo	,				
23.			ude any proper	ty you bor	rowed from, are storing	for, or hold in trust
	■ No					
	Yes. Fill in the details.					
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the prop (Number, Street, City, S Code)		Describe	the property	Value
	rt 10: Give Details About Environmental Infor					
٠.	and purpose of Fare 15, and 16 norming dominates	.о арр.у.				
	Environmental law means any federal, state, toxic substances, wastes, or material into the regulations controlling the cleanup of these s	air, land, soil, surface	e water, ground			
	Site means any location, facility, or property a	-	environmental	law, wheth	ner you now own, operate	e, or utilize it or used

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance,

hazardous material, pollutant, contaminant, or similar term.

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Debtor 1 Cheryl A. Bach

24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? Nο Yes. Fill in the details. Name of site Governmental unit Environmental law, if you Date of notice Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and know it ZIP Code) 25. Have you notified any governmental unit of any release of hazardous material? Nο ☐ Yes. Fill in the details. Name of site Governmental unit Environmental law, if you Date of notice Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and know it ZIP Code) 26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders. No П Yes. Fill in the details. **Case Title** Nature of the case Status of the Court or agency **Case Number** Name case Address (Number, Street, City, State and ZIP Code) Part 11: Give Details About Your Business or Connections to Any Business 27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business? ☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time A member of a limited liability company (LLC) or limited liability partnership (LLP) ☐ A partner in a partnership ☐ An officer, director, or managing executive of a corporation ☐ An owner of at least 5% of the voting or equity securities of a corporation No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. **Employer Identification number Business Name** Describe the nature of the business Address Do not include Social Security number or ITIN. (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper Dates business existed 28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. Nο Yes. Fill in the details below. Name **Date Issued** Address (Number, Street, City, State and ZIP Code)

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Part '	12: Sign Below		
are tru	ue and correct. I understand that i	making a false statement, concealing property, or nes up to \$250,000, or imprisonment for up to 20 ye	I declare under penalty of perjury that the answers obtaining money or property by fraud in connection ears, or both.
/s/ C	heryl A. Bach		
Che	ryl A. Bach	Signature of Debtor 2	
Signa	ature of Debtor 1		
Date	March 29, 2018	Date	
Did yo	ou attach additional pages to You	r Statement of Financial Affairs for Individuals Fili	ing for Bankruptcy (Official Form 107)?
■ No			
☐ Ye	S		
Did yo	ou pay or agree to pay someone w	vho is not an attorney to help you fill out bankrupt	cy forms?
■ No			
☐ Ye	s. Name of Person . Attach th	ne Bankruptcy Petition Preparer's Notice, Declaration,	and Signature (Official Form 119).

Fill in this information to identify your case:								
Debtor 1	Cheryl A. Bach							
Debtor 2 (Spouse, if filing)								
United States B	Bankruptcy Court for the: Western District of Pennsylvania							
Case number (if known)	18-20766							

Check	Check as directed in lines 17 and 21:									
According to the calculations required by this Statement:										
	1. Disposable income is not determined under 11 U.S.C. § 1325(b)(3).									
•	2. Disposable income is determined under 11 U.S.C. § 1325(b)(3).									
	3. The commitment period is 3 years.									
	4. The commitment period is 5 years.									
	Check if this is an amended filing									

### Official Form 122C-1

# **Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known).

### Part 1: Calculate Your Average Monthly Income 1. What is your marital and filing status? Check one only. □ Not married. Fill out Column A, lines 2-11. ■ Married. Fill out both Columns A and B, lines 2-11. Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case. 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space. Column A Debtor 1 Debtor 2 or non-filing spouse 2. Your gross wages, salary, tips, bonuses, overtime, and commissions (before all 4,034.00 3,359.00 payroll deductions). Alimony and maintenance payments. Do not include payments from a spouse if 0.00 0.00 Column B is filled in. 4. All amounts from any source which are regularly paid for household expenses of you or your dependents, including child support. Include regular contributions from an unmarried partner, members of your household, your dependents, parents, and roommates. Do not include payments from a spouse. Do not include payments 0.00 0.00 you listed on line 3. 5. Net income from operating a business, Debtor 1 profession, or farm \$ 0.00 Gross receipts (before all deductions) 0.00 Ordinary and necessary operating expenses 0.00 Copy here -> \$ 0.00 0.00 Net monthly income from a business, profession, or farm \$ 6. Net income from rental and other real property Debtor 1 0.00 \$ Gross receipts (before all deductions) 0.00 -\$ Ordinary and necessary operating expenses 0.00 Copy here -> \$ 0.00 0.00 \$ Net monthly income from rental or other real property

Official Form 122C-1 Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

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					Column A Debtor 1		Column B Debtor 2 o	or	
7.	Interest, dividends,	and royalties			\$	0.00	\$	0.00	
	Unemployment con	•			\$	0.00	\$	0.00	
		ount if you contend that the act. Instead, list it here:	amount received v	vas a benefit unde	er				
				0.00					
	For your spouse		\$	0.00					
9.	Pension or retirement benefit under the Social	ent income. Do not include cial Security Act.	any amount recei	ved that was a	\$	0.00	\$	0.00	
	Do not include any be received as a victim of	er sources not listed above enefits received under the Sof a war crime, a crime agaif necessary, list other sources.	Social Security Act inst humanity, or in	or payments nternational or					
					\$	0.00	\$	0.00	
					\$	0.00	\$	0.00	
	Total amour	nts from separate pages, if a	any.	4	<b>\$</b>	0.00	\$	0.00	
11.		average monthly income add the total for Column A to			4,034.00	+ \$_	3,359.00	= \$	7,393.00
									al average nthly income
Part	2: Determine Ho	ow to Measure Your Dedu	ctions from Inco	me					<b>,</b>
12. 13.	Copy your total ave Calculate the marita	rage monthly income fron all adjustment. Check one:	n line 11.					\$	7,393.00
		rried. Fill in 0 below.							
	☐ You are married	d and your spouse is filing w	vith you. Fill in 0 be	elow.					
	Fill in the amour	d and your spouse is not filir nt of the income listed in line	e 11, Column B, th						
	•	ch as payment of the spous he basis for excluding this i	•					•	
		a separate page.	ncome and the an	iount of income de	evoled to ea	cii puipose	. II Hecessar	y, iist addit	Ullai
	If this adjustmen								
	ii this adjustmen	nt does not apply, enter 0 be	elow.						
	ii this adjustmer	nt does not apply, enter 0 be	elow.	\$		_			
	ii this adjustmer	nt does not apply, enter 0 be	elow.	<b>\$</b>		_			
		nt does not apply, enter 0 be	elow.	\$ _ \$ _ +\$ _					
	,,	nt does not apply, enter 0 be		* +\$ _	0.		ppy here=>	<u>-</u> _	0.00
14.	Total	1177		* +\$ _	0.	<u>00</u> co	ppy here=>	<b>-</b> \$	7,393.00
14. 15.	Total	1177	13 from line 12.	\$ _ +\$ _ \$ _	0.	00 Co	ppy here=>	<b>-</b> \$	
	Total	thly income. Subtract line	13 from line 12.  he year. Follow t	\$\$				<b>-</b> \$	
	Total  Your current mont  Calculate your cur  15a. Copy line 14	thly income. Subtract line	13 from line 12.	\$\$				\$	7,393.00
	Total  Your current mont  Calculate your cur  15a. Copy line 14	thly income. Subtract line rrent monthly income for there=>	13 from line 12.	\$\$				\$	7,393.00

Cheryl A. Bach

Debtor 1

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Debt	or 1	Cne	eryi A. Bach		Case number (if known)	18-20/66	
16	Cal	culate	the median family income that applies to y	<b>YOU</b> Follow these steps:			
10			n the state in which you live.	PA			
	104		The state in which you live.				
	16b	. Fill ir	n the number of people in your household.	2			
	16c	To fi	n the median family income for your state and a nd a list of applicable median income amounts uctions for this form. This list may also be avai	s, go online using the link		\$	62,359.00
17	. Hov	v do t	he lines compare?				
	17a	. 🗆	Line 15b is less than or equal to line 16c. C 11 U.S.C. § 1325(b)(3). <b>Go to Part 3.</b> Do N				
	17b	. •	Line 15b is more than line 16c. On the top 1325(b)(3). <b>Go to Part 3 and fill out Calcu</b> your current monthly income from line 14 a	lation of Your Disposa			
Par	t 3:	Ca	Iculate Your Commitment Period Under 11	U.S.C. § 1325(b)(4)			
18.	Cop	y you	ır total average monthly income from line 1	1		\$	7,393.00
19.	con	tend th	ne marital adjustment if it applies. If you are hat calculating the commitment period under 1 income, copy the amount from line 13.			our	
			e marital adjustment does not apply, fill in 0 on	line 19a.		-\$	0.00
	19b	. Subt	tract line 19a from line 18.			\$_	7,393.00
20.	Cal	culate	your current monthly income for the year.	Follow these steps:			
	20a	. Copy	y line 19b			\$	7,393.00
		Multi	iply by 12 (the number of months in a year).				<b>x</b> 12
	20b	. The	result is your current monthly income for the y	ear for this part of the fo	rm	\$	88,716.00
	20c	. Сору	y the median family income for your state and	size of household from I	ine 16c	\$	62,359.00
	21.	How	do the lines compare?				
			Line 20b is less than line 20c. Unless otherwing period is 3 years. Go to Part 4.	se ordered by the court,	on the top of page 1 of this for	orm, check box 3,	The commitment
			Line 20b is more than or equal to line 20c. Un commitment period is 5 years. Go to Part 4.	less otherwise ordered l	by the court, on the top of pa	ge 1 of this form,	check box 4, The
Par	t 4:	Sig	gn Below				
	Ву	signing	g here, under penalty of perjury I declare that t	he information on this st	atement and in any attachme	ents is true and co	orrect.
)	<b>(</b> /s	Che	ryl A. Bach				
			A. Bach e of Debtor 1				
			e of Deblor 1				
	_ ~		I/DD / YYYY				
	If yo	u che	cked 17a, do NOT fill out or file Form 122C-2.				

If you checked 17b, fill out Form 122C-2 and file it with this form. On line 39 of that form, copy your current monthly income from line 14 above.

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							•					
Fill in	this informa	ation to ide	ntify your case	e:								
Debtor	1 <u>C</u> h	neryl A. Ba	ch									
Debtor (Spous	e, if filing)											
United	States Bank	ruptcy Cour	for the: Wes	tern District of	f Pennsylvan	nia						
Case n		-20766						☐ Che	eck if this	is an amend	lili bət	ing
	Form 122C pter 13		lation of	Your D	isposa	able Ir	ncome					04/16
			eed your comp form 122C-1).	leted copy o	f Chapter 1	3 Stateme	nt of Your Cu	ırrent Monti	hly Incom	e and Calcula	ation o	of
space i additio	s needed, a nal pages, v	ttach a sep	as possible. If a arate sheet to ta ame and case	his form, Inc	lude the lin							
Part 1:	Calcula	ate Your De	ductions from	Your Income	•							
the	questions ir	n lines 6-15	ce (IRS) issue: To find the IR ailable at the b	S standards,	go online u	sing the I						
expe	enses if they	are higher t	s set out in lines nan the standar ny amounts tha	ds. Do not inc	lude any ope	erating exp	enses that yo	u subtracted	from inco			
If yo	ur expenses	differ from i	nonth to month,	enter the ave	erage expens	se.						
Note	e: Line numb	ers 1-4 are	not used in this	form. These n	umbers app	ly to inform	nation required	d by a simila	r form use	d in chapter 7	cases.	
5.	The number	er of people	used in deterr	nining your d	deductions	from inco	me					
	plus the nur	mber of any	ople who could l additional depe your household	ndents whom						2		
Nati	onal Standa	ırds	You must use	the IRS Natio	onal Standar	ds to answ	er the questic	ons in lines 6	S-7.			
6.			her items: Usir ar amount for fo				in line 5 and	the IRS Nati	onal	\$	1	1,132.00
7.	the dollar ar people who	mount for ou are 65 or o	are allowance t-of-pocket hea derbecause of ount, you may o	th care. The r der people ha	number of peave a higher	eople is spl IRS allowa	it into two cate ance for health	egoriespeo	ple who a	re under 65 ar	nd	

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Page 34 of 42 Document Debtor 1 Cheryl A. Bach Case number (if known) 18-20766 People who are under 65 years of age 7a. Out-of-pocket health care allowance per person 49 7b. Number of people who are under 65 2 7c. Subtotal. Multiply line 7a by line 7b. 98.00 Copy here=> \$ 98.00 People who are 65 years of age or older 7d. Out-of-pocket health care allowance per person 117 7e. Number of people who are 65 or older 0 7f. Subtotal. Multiply line 7d by line 7e. 0.00 Copy here=> 0.00 7g. Total. Add line 7c and line 7f 98.00 Copy total here=> \$ 98.00 Local Standards You must use the IRS Local Standards to answer the questions in lines 8-15. Based on information from the IRS, the U.S. Trustee Program has divided the IRS Local Standard for housing for bankruptcy purposes into two parts: Housing and utilities - Insurance and operating expenses Housing and utilities - Mortgage or rent expenses To answer the questions in lines 8-9, use the U.S. Trustee Program chart. To find the chart, go online using the link specified in the separate instructions for this form. This chart may also be available at the bankruptcy clerk's office. Housing and utilities - Insurance and operating expenses: Using the number of people you entered in line 5, fill 560.00 in the dollar amount listed for your county for insurance and operating expenses. Housing and utilities - Mortgage or rent expenses: 9a. Using the number of people you entered in line 5, fill in the dollar amount 988.00 listed for your county for mortgage or rent expenses. 9b. Total average monthly payment for all mortgages and other debts secured by your home. To calculate the total average monthly payment, add all amounts that are contractually due to each secured creditor in the 60 months after you file for bankruptcy. Next divide by 60. Name of the creditor Average monthly payment **Bank of America** 801.65 \$ Repeat this amount Copy 801.65 801.65 9b. Total average monthly payment \$ here=> on line 33a. 9c. Net mortgage or rent expense. Subtract line 9b (total average monthly payment) from line 9a (mortgage Copy 186.35 186.35 or rent expense). If this number is less than \$0, enter \$0. here=>

Explain why:

10. If you claim that the U.S. Trustee Program's division of the IRS Local Standard for housing is incorrect and

affects the calculation of your monthly expenses, fill in any additional amount you claim.

0.00

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Debtor 1 Cheryl A. Bach Case number (if known) 18-20766 11. Local transportation expenses: Check the number of vehicles for which you claim an ownership or operating expense. ☐ 0. Go to line 14. ■ 1. Go to line 12. 2 or more. Go to line 12. 12. Vehicle operation expense: Using the IRS Local Standards and the number of vehicles for which you claim the 250.00 operating expenses, fill in the Operating Costs that apply for your Census region or metropolitan statistical area. 13. Vehicle ownership or lease expense: Using the IRS Local Standards, calculate the net ownership or lease expense for each vehicle below. You may not claim the expense if you do not make any loan or lease payments on the vehicle. In addition, you may not claim the expense for more than two vehicles. Vehicle 1 **Describe Vehicle 1:** 13a. Ownership or leasing costs using IRS Local Standard..... 0.00 13b. Average monthly payment for all debts secured by Vehicle 1. Do not include costs for leased vehicles. To calculate the average monthly payment here and on line 13e, add all amounts that are contractually due to each secured creditor in the 60 months after you file for bankruptcy. Then divide by 60. Name of each creditor for Vehicle 1 Average monthly payment -NONE-Repeat this Copy amount on **Total Average Monthly Payment** 0.00 0.00 Copy net Vehicle 1 13c. Net Vehicle 1 ownership or lease expense Subtract line 13b from line 13a. if this number is less than \$0, enter \$0. ..... expense here 0.00 0.00 Vehicle 2 Describe Vehicle 2: 13d. Ownership or leasing costs using IRS Local Standard..... 0.00 13e. Average monthly payment for all debts secured by Vehicle 2. Do not include costs for leased vehicles. Name of each creditor for Vehicle 2 Average monthly payment \$ Copy Repeat this here amount on line Total average monthly payment 13f. Net Vehicle 2 ownership or lease expense Copy net Vehicle 2 Subtract line 13e from line 13d. if this number is less than \$0, enter \$0. ..... expense here 0.00 0.00 14. Public transportation expense: If you claimed 0 vehicles in line 11, using the IRS Local Standards, fill in the 0.00 Public Transportation expense allowance regardless of whether you use public transportation. 15. Additional public transportation expense: If you claimed 1 or more vehicles in line 11 and if you claim that you may also deduct a public transportation expense, you may fill in what you believe is the appropriate expense, but you may 0.00

not claim more than the IRS Local Standard for Public Transportation.

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 Debtor 1
 Cheryl A. Bach
 Case number (if known)
 18-20766

Oth	er Necessary Expenses	In addition to the expense of the following IRS categorie		listed above,	you are allowed your monthly expenses	s for	
16.	self-employment taxes, soo your pay for these taxes. H	cial security taxes, and Medic lowever, if you expect to recomment to total monthly amount	care taxes. eive a tax r	You may inc efund, you m	d local taxes, such as income taxes, lude the monthly amount withheld from ust divide the expected refund by 12 for taxes.	\$	1,677.00
17.	·	The total monthly payroll dec	uctions tha	at your job red	quires, such as retirement		
	contributions, union dues, a		h auch ac	volunton, 40	1(k) contributions or payroll savings.	\$	287.00
1Ω					e insurance. If two married people are	<u> </u>	
10.	filing together, include payr	ments that you make for you or life insurance on your dep	r spouse's	term life insu		\$	0.00
19.	administrative agency, suc	The total monthly amount the has spousal or child suppor	t payments		•	¢	0.00
00					ou will list these obligations in line 35.	\$	
20.	as a condition for your j	hly amount that you pay for	education t	hat is either r	equired:		
	_		t child if no	nublic educa	ation is available for similar services.	\$	0.00
21.		, , ,		•	itting, daycare, nursery, and preschool.	· —	
		or any elementary or second		-	name, dayoure, nareery, and processes.	\$	0.00
22.	Additional health care ex that is required for the heal by a health savings accour		2.22				
	Payments for health insura	nce or health savings accou	nts should	be listed only	in line 25.	\$	0.00
23.	Optional telephone and to for you and your dependent phone service, to the exter- income, if it is not reimburs. Do not include payments for expenses, such as those re-	+\$	0.00				
24.	Add all of the expenses a Add lines 6 through 23.	allowed under the IRS expe	ense allow	ances.		\$	4,190.35
Add	itional Expense Deduction	These are additional of Note: Do not include a					
25.					ses. The monthly expenses for health by necessary for yourself, your spouse, or	or	
	Health insurance		\$	379.00			
	Disability insurance		\$	0.00			
	Health savings account		+\$	0.00			
					7		
	Total		\$	379.00	Copy total here=>	\$	379.00
	Total  Do you actually spend this  □ No. How much do y		\$	379.00	Copy total here=>	\$	379.00
	Do you actually spend this		\$ \$	379.00	Copy total here=>	\$	379.00
26.	Do you actually spend this  No. How much do y  Yes  Continued contributions continue to pay for the reasyour household or member	ou actually spend?  to the care of household of sonable and necessary care	\$	embers. The rt of an elderle to pay for si	e actual monthly expenses that you will ly, chronically ill, or disabled member of uch expenses. These expenses may	\$	0.00
	Do you actually spend this  No. How much do y Yes  Continued contributions continue to pay for the reasyour household or member include contributions to an  Protection against family	to the care of household of sonable and necessary care of your immediate family whaccount of a qualified ABLE violence. The reasonably necessary care.	\$ r family m and suppo to is unable program. 2 ecessary r	embers. The rt of an elderl e to pay for si 26 U.S.C. § 52 nonthly expe	e actual monthly expenses that you will ly, chronically ill, or disabled member of uch expenses. These expenses may		

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btor 1	Cheryl A. Bach		Case number (if k	known)	18-2	20766		
	Additional home energy costs. Your hom ine 8.	e energy costs are included in your insur	rance and opera	ating 6	expense	es on		
	If you believe that you have home energy on the fill in the excess amount of home er		costs included	l in ex	penses	on line		
	You must give your case trustee document amount claimed is reasonable and necessa		nust show that t	he ad	ditional		\$_	0.00
	Education expenses for dependent child \$160.42* per child) that you pay for your de public elementary or secondary school.							
	You must give your case trustee document claimed is reasonable and necessary and r		nust explain wh	y the a	amount			
	* Subject to adjustment on 4/01/19, and eve	ent.	\$	0.00				
	Additional food and clothing expense. Thigher than the combined food and clothing than 5% of the food and clothing allowance	allowances in the IRS National Standard						
	To find a chart showing the maximum addit instructions for this form. This chart may als			sepa	ate			
	You must show that the additional amount of	claimed is reasonable and necessary.					\$	0.00
	. Continuing charitable contributions. The amount that you will continue to contribute in the form of cash or financial instruments to a religious or charitable organization. 11 U.S.C. § 548(d)(3) and (4).							
	Do not include any amount more than 15%	of your gross monthly income.					\$_	0.00
32	Add all of the additional expense deductions.  Add lines 25 through 31.							379.00
	Add lines 25 through 31.							
	Add lines 25 through 31.							
Dedu 33. F	, and the second		ome mortgage	s, veh	icle			
Dedu 33. F	or debts that are secured by an interest	<b>33a through 33e.</b> ent, add all amounts that are contractual						
Dedu 33. F	or debts that are secured by an interest pans, and other secured debt, fill in lines to calculate the total average monthly paym	<b>33a through 33e.</b> ent, add all amounts that are contractual						age monthly
Dedu 33. F lo T c	or debts that are secured by an interest bans, and other secured debt, fill in lines o calculate the total average monthly paymeditor in the 60 months after you file for ba	<b>33a through 33e.</b> ent, add all amounts that are contractual nkruptcy. Then divide by 60.	ly due to each s	secure	ed	=>	Avera paym	ent
Dedu 33. F	or debts that are secured by an interest bans, and other secured debt, fill in lines or calculate the total average monthly paymeditor in the 60 months after you file for band Mortgages on your home  Copy line 9b here	<b>33a through 33e.</b> ent, add all amounts that are contractual nkruptcy. Then divide by 60.	ly due to each s	secure	ed	=>		
<b>Ded</b> u 33. <b>F</b> lo T c	or debts that are secured by an interest bans, and other secured debt, fill in lines or calculate the total average monthly paymeditor in the 60 months after you file for bath Mortgages on your home  Copy line 9b here  Loans on your first two vehicles	33a through 33e. ent, add all amounts that are contractual nkruptcy. Then divide by 60.	ly due to each s	secure	ed			801.65
33. F 16 7 c 33a.	or debts that are secured by an interest bans, and other secured debt, fill in lines or calculate the total average monthly paymeditor in the 60 months after you file for band Mortgages on your home  Copy line 9b here  Loans on your first two vehicles  Copy line 13b here	33a through 33e. ent, add all amounts that are contractual nkruptcy. Then divide by 60.	ly due to each s	secure	ed	=>		801.65 0.00
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33. F 16 7 c 33a.	or debts that are secured by an interest bans, and other secured debt, fill in lines or calculate the total average monthly paymeditor in the 60 months after you file for band Mortgages on your home  Copy line 9b here  Loans on your first two vehicles  Copy line 13b here	33a through 33e. ent, add all amounts that are contractual nkruptcy. Then divide by 60.	ly due to each s	secure	ed	=>		801.65 0.00
Dedu 33. F ld T c 33a. 33b. 33c. 33d.	or debts that are secured by an interest bans, and other secured debt, fill in lines or calculate the total average monthly paymeditor in the 60 months after you file for bath Mortgages on your home  Copy line 9b here  Loans on your first two vehicles  Copy line 13b here  Copy line 13e here	33a through 33e. ent, add all amounts that are contractual nkruptcy. Then divide by 60.	ly due to each s	Doe	ed	=> => nent		801.65 0.00
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Dedu 33. F ld T c 33a. 33b. 33c. 33d.	or debts that are secured by an interest bans, and other secured debt, fill in lines or calculate the total average monthly paymeditor in the 60 months after you file for bath Mortgages on your home  Copy line 9b here  Loans on your first two vehicles  Copy line 13b here  Copy line 13e here  List other secured debts:  The of each creditor for other secured debt	33a through 33e. ent, add all amounts that are contractual nkruptcy. Then divide by 60.	ly due to each s	Doe incluor in	ed s paym ude taxe suranc No	=> => nent	\$\$ \$\$	801.65 0.00
Dedu 33. F ld T c 33a. 33b. 33c. 33d.	or debts that are secured by an interest bans, and other secured debt, fill in lines or calculate the total average monthly paymeditor in the 60 months after you file for bath Mortgages on your home  Copy line 9b here  Loans on your first two vehicles  Copy line 13b here  Copy line 13e here  List other secured debts:  The of each creditor for other secured debt	33a through 33e. ent, add all amounts that are contractual nkruptcy. Then divide by 60.	ly due to each s	Doe included in the control of the c	es paym ude taxe suranc No Yes	=> => nent	\$\$ \$\$	801.65 0.00
Dedu 33. F ld T c 33a. 33b. 33c. 33d.	or debts that are secured by an interest bans, and other secured debt, fill in lines or calculate the total average monthly paymeditor in the 60 months after you file for bath Mortgages on your home  Copy line 9b here  Loans on your first two vehicles  Copy line 13b here  Copy line 13e here  List other secured debts:  The of each creditor for other secured debt	33a through 33e. ent, add all amounts that are contractual nkruptcy. Then divide by 60.	ly due to each s	Doe include or include	ed s paymude taxe surance No Yes No Yes	=> => nent	\$ \$ \$	801.65 0.00
Dedu 33. F ld T c 33a. 33b. 33c. 33d.	or debts that are secured by an interest bans, and other secured debt, fill in lines or calculate the total average monthly paymeditor in the 60 months after you file for bath Mortgages on your home  Copy line 9b here  Loans on your first two vehicles  Copy line 13b here  Copy line 13e here  List other secured debts:  The of each creditor for other secured debt	33a through 33e. ent, add all amounts that are contractual nkruptcy. Then divide by 60.	ly due to each s	Doee include or includ	es paym ude taxe asuranc No Yes	=> => nent	\$ \$ \$	801.65 0.00
Dedu 33. F ld T c 33a. 33b. 33c. 33d.	or debts that are secured by an interest bans, and other secured debt, fill in lines or calculate the total average monthly paymeditor in the 60 months after you file for bath Mortgages on your home  Copy line 9b here  Loans on your first two vehicles  Copy line 13b here  Copy line 13e here  List other secured debts:  The of each creditor for other secured debt	33a through 33e. ent, add all amounts that are contractual nkruptcy. Then divide by 60.	ly due to each s	Doe include or in the control of the	ed  s paymude taxelsurance  No  Yes  No  Yes  No	=> ment es ee?	\$\$ \$\$ \$	801.65 0.00

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Debtor 1 Cheryl A. Bach Case number (if known) 18-20766 34. Are any debts that you listed in line 33 secured by your primary residence, a vehicle, or other property necessary for your support or the support of your dependents? No. Go to line 35. ☐ Yes. State any amount that you must pay to a creditor, in addition to the payments listed in line 33, to keep possession of your property (called the cure amount). Next, divide by 60 and fill in the information below. Name of the creditor Identify property that secures the debt Total cure amount Monthly cure amount  $\div 60 = \$$ -NONE-Copy total 0.00 0.00 Total here=> 35. Do you owe any priority claims - such as a priority tax, child support, or alimony - that are past due as of the filing date of your bankruptcy case? 11 U.S.C. § 507. No. Go to line 36. The Yes. Fill in the total amount of all of these priority claims. Do not include current or ongoing priority claims, such as those you listed in line 19. Total amount of all past-due priority claims 0.00 ÷ 60 0.00 36. Projected monthly Chapter 13 plan payment Current multiplier for your district as stated on the list issued by the Administrative Office of the United States Courts (for districts in Alabama and North Carolina) or by the Executive Office for United States Trustees (for all other districts). To find a list of district multipliers that includes your district, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office. Copy total here=> Average monthly administrative expense 801.65 37. Add all of the deductions for debt payment. Add lines 33e through 36. **Total Deductions from Income** 38. Add all of the allowed deductions. Copy line 24, All of the expenses allowed under IRS 4.190.35 expense allowances Copy line 32, All of the additional expense deductions 379.00 Copy line 37, All of the deductions for debt payment 801.65 5,371.00 5,371.00 Copy total here=> Total deductions.

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Debtor 1	1 .	Cher	yl A. Bac	h						Ü	Ca	se nu	ımber ( <i>if known</i> )	18-2	20766		
Part 2	2:	Dete	ermine Yo	ur Disp	osable Inc	ome Und	ler 11 U.	S.C. § 13	25(b)(2	2)							
					onthly inco										\$		7,393.00
	children. The monthly average of any child support payments, foster care payments, o disability payments for a dependent child, reported in Part I of Form 122C-1, that you received in accordance with applicable nonbankruptcy law to the extent reasonably necessary to be expended for such child.							nts, or ou		\$	0.0	00_					
	Fill in all qualified retirement deductions. The monthly total of all amounts that your employer withheld from wages as contributions for qualified retirement plans, as specified in 11 U.S.C. § 541(b)(7) plus all required repayments of loans from retirement plans, as specified in 11 U.S.C. § 362(b)(19).  Total of all deductions allowed under 11 U.S.C. § 707(b)(2)(A). Copy line 38 here						ecified	t	\$	0.0	00_						
42.	Tot	al of a	II deduction	ons allo	wed unde	r 11 U.S.	C. § 707(	b)(2)(A).	Сору I	line 38 he	re =	:>	\$5,	371.0	00_		
	exp the	enses ir expe	and you hanses. You	ave no i must gi	umstances reasonable ve your cas ntation for t	alternativ e trustee	/e, descri a detaile	be the sp	ecial c	circumstar		nd					
Des	scri	be the	special ci	rcumst	ances					Amount	of exp	ens	е				
									\$								
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	-								<b>"</b>			_	_				
								Total	\$		0.00	- 1	Copy ere=>\$		0.00		
44.	Tot	tal adji	ustments.	Add line	es 40 throu	gh 43. <sub></sub>					.=>	\$_	5,371.0		Copy here=> -\$ _		5,371.00
45.					sposable i		nder § 1:	325(b)(2).	. Subtr	ract line 4	4 from	line	39.		\$	2,	022.00
46.	Cha hav time	ange i ve char e your ı filed y	n income on a recase will be over petition	or expe virtuall e open, n, check	enses. If the y certain to fill in the in	e income change a formation the first o	after the on below. It column, e	date you f For examp enter line 2	iled yo ole, if t 2 in the	our bankru the wages e second	iptcy port report columr	etitio ed in	d in this form on and during ncreased after plain why the				
For	m		Line	Reaso	on for chang	ge				Date of	change	Э	Increase or decrease?		Amount of	change	
	1220 1220 1220 1220 1220 1220	C-2 C-1 C-2 C-1 C-2											☐ Increase ☐ Decrease ☐ Increase ☐ Decrease ☐ Increase ☐ Decrease	<b>)</b>	\$ \$ \$		-
	1220 1220												☐ Increase ☐ Decrease	<b>;</b>	\$		_

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Debtor 1	Cheryl A. Bach	Case number (if known) 18-20766	
Part 4:	Sign Below		
E	By signing here, under penalty of perjury you declare that th	ne information on this statement and in any attachments is true and correct.	
X	/s/ Cheryl A. Bach Cheryl A. Bach Signature of Debtor 1		
Date	March 29, 2018		

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B2030 (Form 2030) (12/15)

### United States Bankruptcy Court Western District of Pennsylvania

In re	Cheryl A. Bach		Case No.	18-20766
		Debtor(s)	Chapter	13
	DISCLOSURE OF COM	PENSATION OF ATTORN	EY FOR DE	CBTOR(S)
c	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2 compensation paid to me within one year before the per rendered on behalf of the debtor(s) in contemplate	e filing of the petition in bankruptcy, or	agreed to be paid	to me, for services rendered or to
	For legal services, I have agreed to accept		\$	4,500.00
	Prior to the filing of this statement I have recei		\$	500.00
			\$	4,000.00
2. \$	310.00 of the filing fee has been paid.			
3. 1	The source of the compensation paid to me was:			
	■ Debtor □ Other (specify):			
4. 7	Γhe source of compensation to be paid to me is:			
	■ Debtor □ Other (specify):			
5. I	■ I have not agreed to share the above-disclosed c	compensation with any other person unl	ess thev are meml	pers and associates of my law firm
5. l a b c d	I have agreed to share the above-disclosed component copy of the agreement, together with a list of the line return for the above-disclosed fee, I have agreed as an analysis of the debtor's financial situation, and references and filing of any petition, schedules are Representation of the debtor at the meeting of credit Representation of the debtor in adversary process. [Other provisions as needed]  Negotiations with secured creditors reaffirmation agreements and applications of the debtor of liens or service. [Other provisions as needed]  Representation of the debtors in any reaffirmation of the debtors in any response to Trustee's certificates of conferences, status conferences, conter actions, not specifically set for a rate of \$250.00/hr and such fees we look fee provision.	to render legal service for all aspects of rendering advice to the debtor in determ, statement of affairs and plan which may reditors and confirmation hearing, and a redings and other contested bankruptcy relations as needed; preparation and household goods.  The defender on the following service of the desired properties and the following service of the desired properties are defended to the following service of the desired properties and the following service of the desired properties and the following service of the desired properties and the following service of the feed of the following service of the feed of the following service of the feed of the fee	ining whether to find the bankruptcy containing whether to find be required; my adjourned head matters; cotion planning; diffling of motion planning; diffling of motion planning; which could be received by the could be re	ched. ase, including: file a petition in bankruptcy; rings thereof;  preparation and filling of ons pursuant to 11 USC  es, relief from stay actions, ended plans, conciliation led after the bar date and any apter 13 Plan and charged at
		CERTIFICATION		
	I certify that the foregoing is a complete statement of ankruptcy proceeding.	of any agreement or arrangement for pa	yment to me for re	epresentation of the debtor(s) in
М	larch 29, 2018	/s/ Michael C. Eisen	Esquire	
	ate	Michael C. Eisen, Es		
		Signature of Attorney M. Eisen & Associat	es. P.C.	
		6200 Babcock Blvd		
		Pittsburgh, PA 1523		
		412-367-9005 Fax:		
		attorneyeisen@yaho	o.com	
		rune oj tav jim		

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### United States Bankruptcy Court Western District of Pennsylvania

		·			
In re	Cheryl A. Bach		Case No.	18-20766	
		Debtor(s)	Chapter	13	

### VERIFICATION OF CREDITOR MATRIX

	VERTICATION OF CREDITOR MATTREE					
The above-na	amed Debtor hereby verifie	that the attached list of creditors is true and correct to the best of his/her knowledge.				
Date: Marc	ch 29, 2018	/s/ Cheryl A. Bach	_			
		Cheryl A. Bach Signature of Debtor				